## Case 23-10026-amc Doc 54 Filed 09/14/23 Entered 09/14/23 12:19:01 Desc Main Document Page 1 of 6

Fill in this information to identify your case:								
Debtor 1	Jermaine Elliott							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		EASTERN DISTRICT O	OF PENNSYLVANIA					
Case number	23-10026							
(if known)								

Check if this is an amended filing

## Official Form 106Sum

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	115,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,770.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	117,770.00
Pa	tt 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	89,130.50
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	6,816.00
	Your total liabilities	\$	95,946.50
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,612.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,009.00
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	hedules.
	■ Yes What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

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Debtor 1 **Jermaine Elliott** 

Case number (if known) 23-10026

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,130.33

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

## Case 23-10026-amc Doc 54 Filed 09/14/23 Entered 09/14/23 12:19:01 Desc Main Document Page 3 of 6

Fill	in this information to identify your	case:							
Del	btor 1 Jermaine E	lliott							
	btor 2 buse, if filing)								
Uni	ited States Bankruptcy Court for th	e: EASTERN DISTRICT	OF PENNSYLVANIA	A					
Cas	se number 23-10026					Check if this is:			
(If kı	nown)		-				ent showing	g postpetition cha ollowing date:	ıpter
0	fficial Form 106l					MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome							12/15
spo atta	plying correct information. If you use. If you are separated and yo ch a separate sheet to this form  Describe Employment	ur spouse is not filing w On the top of any addit	ith you, do not inclu	Ide infor	mati	on about your sp	ouse. If m	ore space is nee	eded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-fi	ling spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Emplo	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not e	mployed		
	employers.	Occupation	Processor						
	Include part-time, seasonal, or self-employed work.	Employer's name	Penn Warehous	sing					
	Occupation may include student or homemaker, if it applies.	Employer's address	2147 S. Columb Philadelphia, PA						
		How long employed t	here?						_
Pai	rt 2: Give Details About Mo	onthly Income							
spoi	mate monthly income as of the cuse unless you are separated.	•		·	·			•	Ü
	e space, attach a separate sheet t		ombine the imormatic	on ioi aii	епр	loyers for that perso	on on the i	iries below. II you	need
						For Debtor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$	3,420.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	

3,420.00

N/A

Calculate gross Income. Add line 2 + line 3.

Debto	or 1	Jermaine Elliott		Case n	umber (if known)	23-10026	
				For I	Debtor 1	For Debto non-filing	
	Сор	y line 4 here	4.	\$	3,420.00	\$	N/A
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	752.00	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e.	Insurance	5e.	\$	0.00	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.+	\$ · \$	56.00 0.00	+ \$	N/A N/A
^			_	· —		-	<del></del>
		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. 7	\$	808.00	\$ \$	N/A
		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,612.00	Φ	N/A
	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm					
		Attach a statement for each property and business showing gross					
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$—	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent		*—	0.00	<u> </u>	1974
		regularly receive					
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A
	8d.	Unemployment compensation	8d.	\$—	0.00	\$	N/A
	8e.	Social Security	8e.	\$	0.00	\$	N/A
	8f.	Other government assistance that you regularly receive		· —			
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	)				
		Specify:	8f.	\$	0.00	\$	N/A
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	+ \$	N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
10	Cald	culate monthly income. Add line 7 + line 9.	10. \$		.612.00 + \$	NI/A	\$ 2.612.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. φ		,612.00 + \$_	N/A	= \$ 2,612.00
	Stat	e all other regular contributions to the expenses that you list in Schedule					
	othe	ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	•		•		ıle J.
		cify:			- '		+\$0.00
		the amount in the last column of line 10 to the amount in line 11. The res					
	Writ	e that amount on the Summary of Schedules and Statistical Summary of Certa	in Liab	oilities a	ind Related Dat	ta, if it 12.	\$ 2,612.00
	иррі						
							Combined monthly income
13.	Do	you expect an increase or decrease within the year after you file this form	?				onday moonie
		No.					
		Yes. Explain:					

Fill	in this informa	ition to identify y	our case:			1		
Deb		Jermaine Ell				Che	ck if this is:	
		ocimanic En					An amended filing	
Deb	tor 2							wing postpetition chapter
(Spc	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bankr	uptcy Court for the:	EASTE	RN DISTRICT OF PENNS	SYLVANIA	-	MM / DD / YYYY	
Cas	e number 23	3-10026						
(If kr	nown)							
$\bigcirc$ 1	fficial Fo	rm 106J				•		
		J: Your	Exper	ises				12/1
Be info nun	as complete a ormation. If m nber (if know	and accurate as lore space is ne n). Answer eve	possible eded, atta ry questio	. If two married people a ach another sheet to this				
Par 1.	t 1: Descr Is this a joir	ibe Your House nt case?	hold					
	■ No. Go to		in a separ	ate household?				
	□ N □ Y	-	st file Offic	ial Form 106J-2, <i>Expense</i>	s for Separate Hous	ehold of Del	otor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D and Debtor 2		☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			-		_	☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
								□ No
								☐ Yes
3.	expenses o	enses include f people other t d your depende	han $_{oldsymbol{\square}}$	No Yes				_ ,,,,
exp	imate your ex		our bankr	uptcy filing date unless y				apter 13 case to report of the form and fill in the
the		h assistance an		government assistance cluded it on Schedule I:			Your exp	enses
4.		or home owners and any rent for th		uses for your residence. I or lot.	Include first mortgag	je 4. \$	·	679.00
	If not include	led in line 4:						
	4a. Real e	estate taxes				4a. \$	<b>.</b>	0.00
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
			•	upkeep expenses		4c. \$		0.00
F		owner's associa		dominium dues our residence, such as ho	omo oquitu locas	4d. §		0.00 115.00
	ACICILI()[14] [	norioade Davim	erus (or vr	no residence, such as no	nne enny mans	י כ	1	

Debtor 1 J	ermaine Elliott	Case numl	ber (if known)	23-10026
6. Utilities				
	ectricity, heat, natural gas	6a.	\$	325.00
	ater, sewer, garbage collection	6b.	· -	45.00
	elephone, cell phone, Internet, satellite, and cable services	6c.	·	60.00
	ther. Specify:	6d.	\$	0.00
	d housekeeping supplies		\$	550.00
	re and children's education costs	8.		0.00
. Clothine	g, laundry, and dry cleaning	9.	\$	75.00
	Il care products and services	10.	·	60.00
	and dental expenses	11.		0.00
	ortation. Include gas, maintenance, bus or train fare.		<b>–</b>	0.00
	nclude car payments.	12.	\$	100.00
	nment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ple contributions and religious donations	14.		0.00
5. <b>Insuran</b>	——————————————————————————————————————			
Do not i	nclude insurance deducted from your pay or included in lines 4 or 20.			
15a. Li	re insurance	15a.	\$	0.00
15b. H	ealth insurance	15b.	\$	0.00
15c. V	ehicle insurance	15c.	\$	0.00
15d. O	ther insurance. Specify:	15d.		0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.			<u> </u>
Specify:	то по	16.	\$	0.00
7. Installm	ent or lease payments:			
	ar payments for Vehicle 1	17a.	\$	0.00
17b. C	ar payments for Vehicle 2	17b.	\$	0.00
17c. O	ther. Specify:	17c.	\$	0.00
17d. O	ther. Specify:	17d.	\$	0.00
8. Your pa	yments of alimony, maintenance, and support that you did not report as		_	
deducte	d from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
<ol><li>Other p</li></ol>	ayments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	al property expenses not included in lines 4 or 5 of this form or on Sche			
	ortgages on other property	20a.	· -	0.00
20b. R	eal estate taxes	20b.		0.00
20c. P	operty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. M	aintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. H	omeowner's association or condominium dues	20e.	\$	0.00
1. Other: §	Specify:	21.	+\$	0.00
0 0-11-				
	te your monthly expenses		Φ.	0.000.00
	I lines 4 through 21.		\$	2,009.00
	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add	l line 22a and 22b. The result is your monthly expenses.		\$	2,009.00
3 Calcula	te your monthly net income.			
	opy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,612.00
	ppy your monthly expenses from line 22c above.	23b.		2,009.00
20D. U	by your monthly expenses from the 220 above.	۷۵۵.		2,009.00
23c. Si	ubtract your monthly expenses from your monthly income.			
	ne result is your <i>monthly net income</i> .	23c.	\$	603.00
4. <b>Do you</b> For exam	expect an increase or decrease in your expenses within the year after yould, do you expect to finish paying for your car loan within the year or do you expect your monto to the terms of your mortgage?			se or decrease because of a
	Evalain hara:			
☐ Yes.	Explain here:			